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**October 11, 2011-Testimony before the House of Representatives on Pending HB 4936**

Thank you, Chairman Lund and members of the committee for the opportunity to speak to you. During my 32 years as a case manager, the director of a residential and out-patient rehabilitation program, serving people who have suffered traumatic brain and spinal cord injuries, my clients have come from all income levels, from all walks of life, from different racial and ethnic backgrounds and, if I had asked, from both political parties.

I know that these injuries and their resultant losses are devastating on the individuals and their families. HB 4936 would allow Michigan drivers to purchase as little as \$250,000 of personal injury protection. That would not even begin to cover the costs of the emergency medical attention and extensive hospital, medical and rehabilitation required in these situations. This legislation would dismantle the present automobile no-fault system and leave these injured individuals and their families in serious financial difficulties and have the likely effect of wiping out their savings, causing them to lose their homes or being forced into bankruptcy. It is also likely that these families would look to Medicaid for the necessary care and treatment, which would put additional budgetary pressure on our state.

Under this proposed legislation, no one, regardless of income level or employment standing, will have sufficient protection. For that reason alone, I do not think that any of my past or present clients or any client in the future, regardless of political affiliation would support this bill. Moreover, there is nothing in this legislation that would require insurance companies to reduce the auto no-fault costs in any way.

I would like to stress that the coverage under Auto-No-Fault is not unlimited but it is lifetime. The problem here is we are not talking about a watch; we are talking about a brain. Imagine for a minute, you have sustained a traumatic brain injury. You didn't ask for this or cause this, but you suffered a catastrophic injury. First, your family will be told that you may not live. Then, they will be advised that you will never be the same again. But suddenly you open your eyes. Now, imagine that you can't remember what day it is or how to pick up a spoon to feed yourself. For months you will need in-patient and then out-patient rehabilitation to try to relearn many of the skills you once had. You may need 24 hour 7 day a-week supervision with attendant care. Under the present proposal you will be limited to 8 hours a day. Your recovery will not be the same as anyone else so timelines will be different. Where would you or your family want your services cut off?

In addition, there are two things that I haven't heard addressed yet

- Case Management
- Life Care Planning

Under the present law, the claimant has a right to choose a case manager. The case manager sees that the injured party is provided those services necessary to meet his or her health and rehabilitation needs and to achieve quality, cost effective outcomes. Case Managers are guided by standards of practice and a code of ethics. As a case manager I am always cognizant of the costs and work with the insurance carriers and families to insure that they receive what is **reasonably necessary** to recover. This includes obtaining several price quotes for a service.

There are almost 1000 case managers active in Michigan. Under this bill, we would all lose our jobs, even though we work to prevent what would otherwise be the costly fragmentation of care.

In addition, some like me provide Life Care Plans. A Life Care plan is a comprehensive analysis of the present and future needs of the injured individual along with the associated costs for that treatment and care. It is a road map for assisting families, insurance adjusters and attorneys in understanding what needs to be done to maximize the functional independence of the traumatically injured person. It required 164 hours of post graduate training and is certified by a governing body after passing an exam. Nationally Life Care planners use their skills and resources to identify the lifetime cost for the injured party. Because I have done many of these plans for persons from birth to middle age, I can attest that in some of these cases the proposed cap of five million dollars will be wholly inadequate to cover the injured party's critical needs.

- A child with a TBI at age six will require over a million dollars in lifetime therapies.
- A person with TBI at age 28 who is totally dependent on caregivers and has a feeding tube will require enteral equipment including a Joey pump at \$940,800. The Osmolite formula for the pump costs \$318,664.00. Her wheelchair equipment will total \$366,086.56 these are over her lifetime.
- A child, age 5 with TBI will require \$114, 975 per year through lifetime for diapers.
- A person, age 57 with spinal cord injury will require \$105,515 in colostomy products and \$24,874 in catheter products. Her diapers cost \$120,953 and that's 4015 diapers a year.
- A child, age 13 with a TBI, has had 9 brain surgeries and 27 admissions or procedures since November. Her trauma unit and ICU totaled \$309,000, for two months. A recent one month stay cost \$302,000 for several brain surgeries and three shunts. Her bills have hit \$888,000 without physician fees or radiology fees included.

Finally, let me add that Michigan is looked upon as the premiere provider of brain injury services in the United States. Others come to us for education, training and services. The Veterans, who are suffering brain trauma from blast injuries, are trying to gain access to these programs. If this Bill passes, these programs will no longer exist. There will no longer be pride in knowing that Michigan meets the needs of the disabled. What there **will be** is a greater impact on an already hurting Michigan economy through the loss of thousands of jobs in the fields of medicine and rehabilitation and the significant scale back or elimination of plans to provide hospital and medical care for Michiganders throughout the state. Most importantly, people with disabilities will be displaced and left in despair. For what, an illusory discount in insurance?

Please review the math. Bill 4936 is really bad for your family, it is bad for my clients and it is bad for Michigan and should not be passed. Thank you.

Respectfully submitted,

Linda Michaels Gruber, MA, CRC, CCM, CLCP, LPC, CBIST

| Client                                       | Age | Type of Service              | Cost of Service | Present         |
|--|-----|------------------------------|-----------------|-----------------|
|  |     |                              | LE              | cost of service |
| Child with TBI                               | 6   | therapies                    | 1,000,000       |                 |
|  |     | OT/PT/SP/L                   |                 |                 |
| Adult with TBI                               | 28  | feeding tube/pump            | \$940,800       |                 |
|  |     | Osmolite formula             | \$318,664       |                 |
|  |     | wheelchair equipment         | \$366,086       |                 |
| Child with TBI                               | 5   | Diapers                      | \$120,953       |                 |
| Adult with SCI                               | 57  | colostomy products           | \$105,515       |                 |
|  |     | catheter products            | \$24,874        |                 |
|  |     | diapers                      | \$120,953       |                 |
| Child with TBI                               | 13  | Trauma,brain surgery, ICU    |                 |                 |
| *Doesn't include physician or radiology fees |     | November, 2010--January 2011 |                 | \$309,000       |
|  |     | July 1-August 2 2011         |                 | \$302,000       |